SECRET

19336 18 September 1957

EDGERTON, GERMESHAUSER AND GRIER, INC.
23,844.87
TE-2191
Bu. Vo. #4 and #5
20 September 1957

7-1004-10-001 (07.9)

600.1

25 <b>X</b> 1		
	Distribution:	
25X1	Original & 1 - Addressee  3 - Contract TE-2191 (Finance)  4 - MASTER  5 - Chrono	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
25 <b>X</b> 1	/aer:18 September 1957	

U. S	Septem (Gen. Reg. No.	General, U. S. ber 7, 1950 . 55, Supp. No. 11)	SERVI	VOUCHER FOR CES OTHER TI	PUKUHASI JAN PERSA	ES C	•			
(Citye piace and date)  THE UNITED STATES, Dr.,  Payee's Account No.  To EDGERTON, GERMESHAUSER AND GRIER, INC.  (Crayee)  No. and Date of Order Order of Order Order of Order										
To EDERTON, GERMESHAUSER AND CRIER, INC.  (Payre)  1622 South "A" Street Las Vegas, Nevada  (Olty) (State)  No. and Date of Order or Services  (Enter description and interest or Federal supply or Services  (Enter description and interest or Federal supply or Services)  (Enter description and interest or Services)  (Cost Per Dollars INVOICE NUMBERS)  (Complete   Partial   Use continuation sheet(s) if necessary  (Payee must NOT use this space)  Differences  (Sign original only)  Date (Payee must NOT use this space)  Differences  (Sign original only)  Date (Sign original only)  Per Title (Signature or initials)  Contract No. TE-2191 Date Req. No. Date (Signature or initials)  ORIGINAL ONLY  (Signature or initials)  Date (Signature or initials)  ORIGINAL ONLY  (Signature or initials)			(Department, on	TERIL OF ESTABLISHMANT					_	
To EDERTON, GERMESHAUSER AND CRIER, INC.  (Payre)  1622 South "A" Street Las Vegas, Nevada  (Olty) (State)  No. and Date of Order or Services  (Enter description and interest or Federal supply or Services  (Enter description and interest or Federal supply or Services)  (Enter description and interest or Services)  (Cost Per Dollars INVOICE NUMBERS)  (Complete   Partial   Use continuation sheet(s) if necessary  (Payee must NOT use this space)  Differences  (Sign original only)  Date (Payee must NOT use this space)  Differences  (Sign original only)  Date (Sign original only)  Per Title (Signature or initials)  Contract No. TE-2191 Date Req. No. Date (Signature or initials)  ORIGINAL ONLY  (Signature or initials)  Date (Signature or initials)  ORIGINAL ONLY  (Signature or initials)	Voucher prep	ared at								
To EDGERTON, GERMESHAUSER AND GRIER, INC.  (Payee)  1622 South "A" Street Las Vegas, Nevada  (City) (State)  No. and Date of Order or Services or Serv	THE UNITED S	TATES Dr	Dauss'	(Give place and date)						•
1622 South   No. and Date of Order   Date of Delivery or Services   Center description, items tumber of construct or Pederal pupply or Service   Discount Terms   INVOICE NUMBERS   QUANTITY   UNIT PRICE   AMOI   Cost   Per   Dollars   INVOICE NUMBERS   Discount Terms   INVOICE NUMBERS   Discoun										•
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No. and Date of Order  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date of Date of Delivery or Services  No. and Date or Se	162	2 South "A			ada					
Contract of Order   Date of Delivery or Service   Contract of Federal supply of Service   Discount Terms   INVOICE NUMBERS   QUANTITY   Cost   Per   Dollars			ress)	(City)	(Sta	ate)				
PAYMENT:  Complete   Sample   Use continuation sheet(s) if necessary  Shipped from to Weight Government B/L No.  I certify that the above bill is correct and just and that payment has not been received.  (Sign original only)  Date   Per   Contract No.   Total   \$23,844  Contract No.   Total   \$23,844  Amount verified; correct for   Cignature or initials)  Contract No.   TE-2191   Date   Req. No.   Data   Low-erect    Ontract No.   TE-2191   Date   Req. No.   Data   Low-erect    Ontroot No.   Te-2191   Date   Req. No.   Date   Req. No.			(Enter description, its	em number of contrac	t or Foderal and	pply	QUANTITY	UNIT	PRICE	AMOU
PAYMENT:  Complete Partial Use continuation sheet(s) if necessary  Shipped from to Weight Government B/L No.  I certify that the above bill is correct and just and that payment has not been received.  (Sign original only)  Date Playee  Title Ontract No.  TE-2191 Date Req. No.  Pursuant to authority vested in me, I certify that this account is correct and properties and propertie			Discount Terms I	NVOICE NUMBE	RS			Cost	Per	Dollars
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PAYMENT:  Complete   Partial   Use continuation sheet(s) if necessary  Shipped from to Weight Government B/L No. Total \$23,844  I certify that the above bill is correct and just and that payment has not been received.  (Sign original only)  Date *Payee (This certificate not required when a like certificate is made by payee on attached bill or billo)  Per Title (Signature or initials)  Contract No. TE-2191 Date Req. No. Date I eee'd.  Pursuant to authority vested in me, I certify that this account is correct and pro † Approved for \$  SIGN ORIGINAL ONLY  Date **ECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM			t	<del>-</del> T						
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Complete									]	
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Shipped from to Weight Government B/L No. Total \$23,844  I certify that the above bill is correct and just and that payment has not been received.  (Sign original only)  Date *Payee (This certificate not required when a like certificate is made by payee on attached bill or bills)  Per Title (Signature or initials)  Contract No. TE=2191 Date Req. No. Data I certed.  Pursuant to authority vested in me, I certify that this account is correct and propriet of the property of the			I las	tomatic of AVX		ĺ				
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ONLY    9/9/5-7 Date										9/59
ONLY    9/9/5-7 Date									ficer)	9//
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ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)		ACCOUNT	TING CLASSIFICATION	(Appropriation Symbo	l must be show:	n: other	-lassificati			
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$\cdot \cdot \cdot_{\mathbf{X}}$										
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Paid by { Check No for \$	Paid by { Check No	),	04664	, 1/, 10	Г Ф			payce na	med above.	meed braces mi

Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180018-4

(Gen Reg No			C <b>VOUCHER FOR</b>	PURCHA	SES	00523 <u>R</u>	000100	)18001 •••	8-4	
(Amended F	escribed by General, U. S. ber 7, 1950 51, Supp. No. 11) ebruary 20, 1952)	SER	VICES OTHER T	HAN PERS	SONAL	В		_		
U. S							_	PA <b>ge 1</b>	of 1 AID BY	$\neg$
Voucher prot	ared at		, bureau, or establishment)					••		
			(Give place and date	e)			-			
THE UNITED :	STATES, Dr.,	Pay	jee's Account No.							1
To EDO	ERTON, GER	MESHAUSER ANI	CRIER, INC.							
162	2 South "A		Las Vegas, Nev				<u>.</u>			
		dress)	(City) ARTICLES OR SERVIC	ES	State)		UNIT	PRICE	AMOUN	<u> </u>
No. and Date of Order	Date of Delivery or Service	(Enter description schedule, an Discount Terms	n, item number of contra ad other information dee INVOICE NUMBI	med necessary)	upply 	QUANTITY	Cost	Per	Dollars	Cts.
	į		4						\$21,644	87
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PAYMENT:  Complete										
Partial										
Final			continuation sheet(s) if ne						400 044	-
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Date	*Payee		like certificate is made by payse on at						-	
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Per Contract No.	TE-2191	Title Date	Req. No.			ature or init		nvoice Rec	'.d	====
			int is correct and proper i					TVOICE TEC	<u> </u>	
	rity vested in me,	•	int is correct and proper i							
Approved for \$			SIGN			(Authoriz	ed Certifyi	ng Officer)		
Ву			ORIGINAL ONLY	Title	(Con	tracti	g Off	icer)		
Title				Date						
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(A)			D WHEN PURCHASES ARE MADI	E OR SERVICES SEC	URED WITH	OUT WRITTEN A	GREEMENT I			

		g Officer (Departmen	t, bureau, or estal	olishment)			-	PA	ID BY	
THE UNITED			Give placy (Give placy) (Give placy)				y primitive section to the section of the section o	SAPC /	9275	
To	Edgerton,	Germeshausen	&.Grier, (Payee)	-Inc			-   14-			
	(Ad	dress)	(City)		(State)		· · · · · · · · · · · · · · · · · · ·		1	=
No. and Date of Order	Date of Delivery or Service	(Enter description schedule, s Discount Terms	ARTICLES OF on, item number and other inform	r of contract 0	r Federal supply necessary)	QUANTITY	Cost	PRICE	Dollars	<u>г</u>
		Month end	ing 31 Ju	ly 1957						
		Direct Labo Materials & Travel							\$ 7,389 3,909 2,561	1
PAYMENT:  Complete  Partial		Freight & E Other Direc Burden	-						155 296 5,541	5
Final		Overhead	e continuation sh	ant(a) if manage	271				1,78	4
Shipped from	<u> </u>	to Us	Weight		overnment B/L N		<u> </u>	Total	\$21,644	
I certify that the	: above bill is correc	(Sign original only	y)		Diff				-	-
Date \$			eshausen & Grier, Inc.  ce certificate is made by payee on attached bill or bills)  Amount verified  Controller (Signature or ini			correct for	r			
Contra			26/57	Reg. No.		Date		nvoice Rec		Ξ
	nority vested in me,	I certify that this acc	ount is correct a	nd proper for						
	<b></b>			INAL		(Authori				
			ON	IL 1	Date			<del>-</del>		_
		THIS FORM MUST BE EXECU	TED WHEN PURCHAS	SES ARE MADE OR						
1 ICIC	THE REVERSE OF						tion optio			

Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180018-4

Standard Form No. 1035—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)

## Tublic Voucher for Purchases and Services Other Than Personal

SAPC 19275 COPY 1073

CONTINUATION SHEET

No. and Date	Date of	A1	RTICLES OR SERVIC	ES		UNIT	PRICE	AMOUN	NT
of Order	Delivery or Service	(Enter description, item and other	number of contract or information deemed	Federal supply schedule, necessary)	QUAN- TITY	Cost	Per	Dollars	Cta
		Distant Tales							-
		Direct Labor					i		
		Week ending	7/7/57 1 7/14/57 1 7/21/57 7/28/57 1	,015.78					
		" @	7/14/57 1	,101.59					
		17 17	7/21/57	942.35					
		MÖNTH "	7/28/57 1	,274.85					
		Total Direct	$\frac{7}{31}\frac{57}{57}$						
		*Materials & S		7,389.56 3,909.60					
		Travel	CT ATCCB	2,561.94					
ľ		Freight & Exp	ress	155.52					
		Other Direct		296.99					
		*Burden		5,544.07		1			
j		Total Direct Overhead:	Costs					\$19,85	1.6
İ		Total Direct	Costs @ 0%			ĺ		7 505	
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_		*Burden				ſ		φειο	1.0
uly Non	Premium 1	pirect Labor 6,9	30.09 @ 80%	\$5,544.07				i	
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		11 11	2196	Supper Mone		тъътд		14	60 75

Standard Form No. 1035—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)

## ublic Voucher for Purchas nd Services Other Than Personal



CONTINUATION SHEET

	Date of	ART	ICLES OR SERVICES	_	OUAN-	UNIT	PRICE	AMOUN	T
o, and Date of Order	Date of Delivery or Service	(Enter description, item nu and other in	mber of contract or Federal s formation deemed necessary	upply schedule, )	QUAN- TITY	Cost	Per	Dollars	C
		P.O. Number	Check No.	Vendor					
		Petty Cash	2196	Supper	Money			1	.7
		11 11	2196	Barstow	Hdwe.	Co.		11	
		11 11	2196	Woods H	lectron	ics (	COD)		
		20745	2216	Las Ve	as Blue	print		27	
İ		20715	2214	Federat	ed Purc	haser	1	1	•
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	:	20688	<b>22</b> 56	Radio 8	Sound	Supp.	Ly	50	
		20761	2256		& Sound			358	
		20732	2253		gas Coi				•
		20711	2243		s Hrdwr				•
		20754	2261		Photo S	ervic	e	26	
		20740	2209		Airways			606	
		20739	2209		Alirways			22	
		20688	2277		& Sound		1 1	19	
		20615	2277		& Sound				١.
		20777	2275		s G. Hu		on	228	
		20670	2274		n Kodak			12	
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Sanitized Copy Approved for Release 2010/06/08 : CIA-RDP65-00523R000100180018-4

Standard Form No. 1085 Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)

## blic Voucher for Purchase Services Other Than Personal

OF COPY

<i>U. S.</i>	Cont	racting Office: (Department, bureau, or e		Sheet No.	3	of Bure	au Vouch	er No	
No. and Date of Order	Date of Delivery or Service		ARTICLES OR SERVICE im number of contract or I her information deemed n	S Federal supply schedule, ecessary)	QUAN- TITY	UNIT	PRICE Per	AMOUN' Dollars	Cts.
		P.O. No.	Check No.	Vendor				-	-
		Petty Cash	2295 2271	Paint Deale Barstow Hdw	e. Co.	oly		5.	50 96 00
		20781 20767 20766	2312 2318 2329	Las Vegas C R.G. Wallac Lee Office	e, Inc Equip.	,		25 28	71 91
		20800 20804	2327 2257 2241	Las Vegas C R.G. Wallac Andrew Hdwe	e, Inc	•		5 4	.25 .20
		20765 20703 20768 20767	2244 2253 2257	Elmar Elect Silver Stat R.G. Wallac	ronics ce Prin ce Co.			152 11	.87 .00 .77
		20767 20767 No P.O. # 20327	2257 2257 2258 2324	R.G. Wallac R.G. Wallac Yale Radio Hawlett Pac	ce Co. Electr	onics			.70
								3,909.	

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•		Officer (Department)	, bureau, or establishme				-	PA	ID BY
Voucher pres	pared at		(Give place and						
								to the law and read to the law of	
THE UNITED	STATES, Dr.,	Pa	yee's Account No	) <b></b>				SAPC/	9276
To	Edgerton. C	ermeshausen	& Grier, Inc	•				COPY	1 OF 3
	<b>G,</b>		(Payee)				- E-	The second section is the second section of the second section is a second section of the second section is a second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the section of	
	Ado	lress)	(City)	(i	State)		_		
No. and Date of	Date of Delivery	(Enter description	ARTICLES OR SERV		upply		UNIT	PRICE	AMOU
Order	or Service	schedule, a Discount Terms	nd other information	deemed necessary)	)	QUANTITY	Cost	Per	Dollars
		Pe	riod ending	31 July 19	57				
			<b>J</b>	, , , , , , , , , , , , , , , , , , ,					
		Fixed Fee							\$ 2,20
PAYMENT:									
Complete Partial									
Final		Use	continuation sheet(s) i	necessarv					
Shipped from	·	0	Weight	Government				Total	
I certify that the	above bill is correct	and just and that pa	yment has not been re	ceived.	1	ee must NOT			
		(Sign original only	)			ces			
	<u> </u>				1				
Da			eshausen & C	rier, Inc.	i .				
			Controller			unt verified; o ature or initia			
C <sub>o</sub>			4/26/57 Req.			Date		nvoice Rec'	
= Pursuant to suth	prity yested in me.	Certify that this acco	unt is correct and prop						
		•	w contest and proj	• •					
Approved for \$			SIGN	.		(Authoriz	ed Certify	ing Officer)	
Ву			ORIGINAL ONLY	Title					
Tala				Des					
1 iffe			ED WHEN PURCHASES ARE !						
		NTING CLASSIFICAT	ION (Appropriation S	ivmbol must be sh	own, oth		on option	1	

## Standard Sanitized Copy Approved for Release 2010/06/08: CIA-RDP65-00523R000100180018-4 Comptroller General, U. S. September 7, 1950 (Gen. Reg. No. 51, Supp. No. 11) Services Other Than Daniel Sanotation (SAPC ) 6

CONTINUATION SHEET

No. and Date	Date of	ARTICLES OR SERVICES	OUAN-	UNIT PRICE		AMOUN	T
of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	Dollars	Cts.
		Total Estimated Cost of Contract Total Costs billed to 31 July 1957 Percentage of Completion (2) divided by (1) Total Fixed Fee on Contract Total Fee Earned to Date Amount of Fee Previously Billed Amount Claimed This Voucher				\$110,000 62,663 11,000 6,270 4,070 2,200	57 .00 .00
		"I certify that the Fixed Fee claimed is that it is proportionate to the progress					
		EDGERÇON, GERMESHAUSEN & GRIER,	INC.				
		0.	ller				

U. S. GOVERNMENT PRINTING OFFICE 16-62666-1

VOUCHER #5

